Statewide Patient Care Guidelines Workgroup OEMS 1001 Technology Park February 23, 2010 10:00 am

Tom Nevetral

Michael Berg

Members Present: Members Absent: Staff: Others:

Max Bornstein

Bob Ryalls

George Lindbeck, M.D.

Allen Yee, M. D.

Debbie Akers

Steve Rea

Delilah Long

Jack Potter, M. D.

Charles Lane, M. D.

Stewart Martin, M. D.

Jeff Meyer Greg Leitz Holly Frost Billy Altman

Mary K. Allen

Asher Brand, M.D. - Vice Chair

	Discussion	Recommendations, Action/Follow- up; Responsible Person
Topic/Subject		
I. Welcome	The meeting was called to order at 10:25 AM by George Lindbeck, M.D. who chaired the meeting.	
II. Approval of Minutes	Minutes were approved as corrected (Jeff Meyer's name was spelled incorrectly).	
III. Format for Patient Care Guidelines	Discussion on what format or template should be utilized. It was noted that North Carolina had a nice format. After reviewing several out of state formats it was noted that some of our regional EMS council's formats were as good if not better. After further discussion and review it was decide to utilize the Thomas Jefferson EMS Council (TJEMS) format. It was determined to continue with the color coding for the various certification levels and text box formats that appeared to be easily interpreted. (See example below).	

		Discussion		Recommendations, Action/F up; Responsible Person
Topic/Subject				
	В	Universal Care Protocol	В	
	В	Identify substance and assure decontamination.	В	
	В	Flush skin/membranes with water unless contraindicated.	В	
	EN	IV Procedure	EN	
	J	Naloxone 0.8 mg IV or IM for suspected narcotic overdose with respiratory depression.	J	
	EN	Diphenhydramine 1 mg/kg slow IVP for dystonic reaction (max dose of 50 mg).	EN	
	I/P	For Symptomatic Tricyclic Antidepressant Overdose: (if QRS >0.12 secs, hypotension, or dysrhythmia) Sodium bicarbonate 1mEq/kg slow IVP over 2 minutes	I/P	
	I/P	For Symptomatic Calcium Channel Blocker Overdose: (if bradycardic, QRS >0.12 secs, heart block, hypotension, lethargy, slurred speech, nausea, vomiting) Calcium chloride 20 mg/kg slow IVP over 10 minutes Sodium bicarbonate 1 mEq/kg slow IVP over 2 minutes.	I/P	
	I/P	For Symptomatic Organophosphate Poisoning: (secretions, bronchospasm, seizures, bradycardia) • Atropine 0.05 mg/kg IV doubled every 5-10 minutes until decreased secretions.	I/P	
C		ic instructions and precautions" will be hyperlinked. It vocackground color in the center of the table should be a		
p c	roduct has been letermine if they v	print copies by an EMS agency must be considered w completed. The on-line version should be in color and wish to print it in color or black and white due to budge should be made available to be downloaded to hand he	an agency car t constraints. A	
		notes should be added (hyperlinked to the guidelines eview the Education Standards/Instructor Guidelines/		e of

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	Practice, EMS Regulations, Training Program Administration Manual & the Atlantic EMS Council Practice Analysis to ensure that pertinent educational notes have been added. Attention should also be directed to ensure that the terminology utilized is NEMSIS compliant http://www.vdh.virginia.gov/OEMS/Files_page/PPCR/PPCRTechManNEMSIS.pdf . When drafting the guidelines please use the new certification level names as follows: A – EMR (Emergency Medical Responder – replacing First Responder) B – EMT (Emergency Medical Technician – replacing the EMT-Basic) J – AEMT (Advanced EMT – replacing the Virginia Enhanced) I – Intermediate (Intermediate – replacing the Intermediate '99) P – Paramedic (no change)	
V. Homework	Please work on reviewing the below guidelines and cut/paste and modify them from the TJEMS protocols which can be located at: http://www.tjems.org/images/uploads/2009 Guidelines Entire Full Size.pdf The workgroup teams and assignments are as follows: 1. Bob Ryalls & Jeff Meyer 1. Abdominal Pain 2. Acute Psychological Agitation 3. Alcohol Related Emergencies 4. Allergic Reactions 2. Mary Kathryn Allen & Steve Rea 1. Envenomation 2. Hyperthermia 3. Hypotension (Symptomatic) 4. Hypothermia 3. Max Bornstein & Allen Yee 1. Near Drowning 2. Poisoning/Overdose 3. Cardiac Arrest: General Management 4. Asystole/PEA	

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	 4. Debbie Akers & Charles Lane, M.D. 1. Atrial Fibrillation/Flutter 2. Bradycardia 3. Chest Pain/Acute Coronary Syndrome 4. Narrow Complex Tachycardia – Paroxysmal SVT 5. Holly Frost & Jack Potter, M.D. 1. Ventricular Fibrillation / Pulseless Ventricular Tachycardia 2. Wide Complex Tachycardia (Ventricular Tachycardia with Pulse) 3. Special Resuscitation: Hypothermic Arrest 4. Post Cardiac Arrest: Induced Hypothermia 6. Delilah Long & Billy Altman 1. Altered Level of Consciousness 2. Seizures 3. Stroke 	
VII. Reading File	Some web links of interest are listed below: Virginia Scope of Practice (VASOP) [Two Documents] — • http://www.vdh.virginia.gov/OEMS/Files_page/Training/ScopeOfPractice-Formulary.pdf • http://www.vdh.virginia.gov/OEMS/Files_page/Training/ScopeOfPractice-Procedures.pdf National Education Standards & Instructor Guidelines — • http://www.nemsed.org/draft_standards/index.cfm Virginia Regional EMS Protocols - • http://www.vdh.virginia.gov/OEMS/Training/PositionPapers.htm Medical Direction Committee Position Papers — • http://www.vdh.virginia.gov/OEMS/Training/PositionPapers.htm Other State Protocols (Guidelines) — • http://www.miemss.org/home/default.aspx?tabid=106 Maryland EMS • http://www.ncems.org/nccepprotocols.html North Carolina EMS • http://www.psd.plantation.org/fire/docs/Protocol-2001.pdf South Florida EMS Atlantic EMS Council Practice Analysis — • http://www.vdh.virginia.gov/OEMS/Files_page/Training/PESPracticeAnalysis.pdf	

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IX. Public Comment	None	
X. For the Good of the		Meeting Dates:
Order		 March 15, 2010
		 April 21, 2010
		• June 9, 2010
XI. Adjourn		